

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: PA
APPLICATION YEAR: 2010

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FORM 2
MCH BUDGET DETAILS FOR FY 2010

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: PA

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 24,394,001

A.Preventive and primary care for children:

\$ 11,880,500 (48.7%)

B.Children with special health care needs:

\$ 10,317,500 (42.3%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 2,196,001 (9%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 64,817,000

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 0

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 0

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 64,817,000

\$ 20,065,575

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 89,211,001

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 158,570

c. CISS: \$ 0

d. Abstinence Education: \$ 1,270,677

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 205,509,204

h. AIDS: \$ 0

i. CDC: \$ 690,508

j. Education: \$ 0

k. Other: \$ 0

1st Time Mother/NPI \$ 250,000

EPA \$ 278,348

HUD \$ 3,875,000

MA Lead/NBS \$ 1,549,000

NBHS \$ 367,664

PRAMS \$ 177,557

State Implem. CSHCN \$ 300,000

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 214,426,528

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 303,637,529

FORM NOTES FOR FORM 2
None
FIELD LEVEL NOTES
None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: PA

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$ 25,621,198	\$ 25,502,552	\$ 25,502,552	\$ 24,660,179	\$ 24,660,179	\$ 24,663,638
2. Unobligated Balance (Line2, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds (Line3, Form 2)	\$ 65,648,000	\$ 58,613,647	\$ 63,441,000	\$ 57,872,356	\$ 67,403,000	\$ 58,642,905
4. Local MCH Funds (Line4, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds (Line5, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income (Line6, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal (Line8, Form 2)	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535	\$ 92,063,179	\$ 83,306,543
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds (Line10, Form 2)	\$ 142,072,396	\$ 142,072,396	\$ 143,226,507	\$ 137,800,302	\$ 149,301,615	\$ 146,898,531
9. Total (Line11, Form 2)	\$ 233,341,594	\$ 226,188,595	\$ 232,170,059	\$ 220,332,837	\$ 241,364,794	\$ 230,205,074
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: PA

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 24,660,179	\$ 24,301,211	\$ 24,324,168	\$	\$ 24,394,001	\$
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
3. State Funds <i>(Line3, Form 2)</i>	\$ 66,606,000	\$ 65,658,532	\$ 63,603,000	\$	\$ 64,817,000	\$
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
7. Subtotal <i>(Line8, Form 2)</i>	\$ 91,266,179	\$ 89,959,743	\$ 87,927,168	\$ 0	\$ 89,211,001	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 149,243,436	\$ 169,245,800	\$ 175,932,687	\$	\$ 214,426,528	\$
9. Total <i>(Line11, Form 2)</i>	\$ 240,509,615	\$ 259,205,543	\$ 263,859,855	\$ 0	\$ 303,637,529	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

Each year the Budgeted amounts on Form 3 are based on anticipated funding, as best known at the time the application is submitted.

The budgeted state funding is based on the previous state fiscal year's appropriated amounts. However, the amount that is actually approved thru the passage of the state budget may be different, depending on the state of the economy. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

The budgeted federal funds are based on the Notice of Grant Awards plus other anticipated funding opportunities known at the time of the application submission. However, the actual receipt of federal grant awards vs the anticipated receipt of funding may change. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount of federal funding received, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

Each year, the amounts budgeted for the block grant are based on the amount that may be applied for in accordance with the grant guidance. However, there have been times when the grant award received is approved at a different amount. When that occurs, when expenditures are reported in the following application submissions there will be a difference reflected between the budgeted amount and the expended amount. The expended amount will always match the actual grant award, as we always fully expend the block grant award.

All state funding administered by the Bureau of Family Health is specifically designated for particular purposes, such as renal programs, hemophilia programs, etc. In those cases where state funding is for purposes not covered under the block grant, the state resources are the only available means of payment. In the cases where both state and block grant funds could be used to support like services, state dollars are spent first. Once exhausted, then federal funds are applied.

FIELD LEVEL NOTES

1. **Section Number:** Form3_Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2007
Field Note:
Grant award was more than what we budgeted for.
2. **Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2008
Field Note:
Funds expended less than anticipated.
3. **Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2007
Field Note:
Funds expended less than anticipated
4. **Section Number:** Form3_Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2008
Field Note:
The 2008 expended amount does not equal the budgeted amount because what was expended is in line with the actual grant awards we received.
5. **Section Number:** Form3_Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2007
Field Note:
Funds expended less than anticipated

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: PA

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 5,431,829	\$ 3,959,297	\$ 3,796,652	\$ 2,788,098	\$ 3,385,475	\$ 2,703,608
b. Infants < 1 year old	\$ 6,911,200	\$ 6,450,714	\$ 6,023,316	\$ 5,146,720	\$ 5,593,926	\$ 5,535,796
c. Children 1 to 22 years old	\$ 48,890,152	\$ 47,917,056	\$ 48,693,103	\$ 46,488,104	\$ 47,928,150	\$ 47,427,030
d. Children with Special Healthcare Needs	\$ 11,081,896	\$ 10,130,920	\$ 10,805,023	\$ 11,742,681	\$ 12,085,938	\$ 12,922,025
e. Others	\$ 17,024,121	\$ 13,625,922	\$ 17,695,458	\$ 13,994,229	\$ 21,139,690	\$ 12,558,893
f. Administration	\$ 1,930,000	\$ 2,032,290	\$ 1,930,000	\$ 2,372,703	\$ 1,930,000	\$ 2,159,191
g. SUBTOTAL	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535	\$ 92,063,179	\$ 83,306,543
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 0		\$ 0		\$ 0	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 140,000,000		\$ 141,000,000		\$ 143,741,206	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 800,000		\$ 783,434		\$ 715,339	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
EPA	\$ 0		\$ 274,396		\$ 747,070	
HUD	\$ 0		\$ 0		\$ 3,000,000	
MA Lead/NBS	\$ 453,000		\$ 453,000		\$ 453,000	
NBHS	\$ 245,000		\$ 245,000		\$ 245,000	
PRAMS	\$ 0		\$ 0		\$ 200,000	
TBI, SECCS	\$ 300,000		\$ 470,677		\$ 200,000	
EPA, HUD	\$ 274,396		\$ 0		\$ 0	
III. SUBTOTAL	\$ 142,072,396		\$ 143,226,507		\$ 149,301,615	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: PA

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 2,323,273	\$ 2,408,526	\$ 2,676,486	\$	\$ 2,505,486	\$
b. Infants < 1 year old	\$ 5,592,354	\$ 4,249,023	\$ 7,810,747	\$	\$ 7,648,747	\$
c. Children 1 to 22 years old	\$ 48,998,186	\$ 51,806,451	\$ 48,945,267	\$	\$ 46,106,401	\$
d. Children with Special Healthcare Needs	\$ 11,292,820	\$ 12,130,388	\$ 9,466,260	\$	\$ 12,667,186	\$
e. Others	\$ 21,129,546	\$ 17,467,443	\$ 16,984,240	\$	\$ 18,087,180	\$
f. Administration	\$ 1,930,000	\$ 1,897,912	\$ 2,044,168	\$	\$ 2,196,001	\$
g. SUBTOTAL	\$ 91,266,179	\$ 89,959,743	\$ 87,927,168	\$ 0	\$ 89,211,001	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 94,644		\$ 158,570	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 1,693,422		\$ 0		\$ 1,270,677	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 142,277,779		\$ 170,496,864		\$ 205,509,204	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 715,339		\$ 556,441		\$ 690,508	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
1st Time Mother/NPI	\$ 0		\$ 0		\$ 250,000	
EPA	\$ 278,348		\$ 278,348		\$ 278,348	
HUD	\$ 3,000,000		\$ 3,000,000		\$ 3,875,000	
MA Lead/NBS	\$ 453,000		\$ 0		\$ 1,549,000	
NBHS	\$ 337,500		\$ 341,968		\$ 367,664	
PRAMS	\$ 191,404		\$ 182,422		\$ 177,557	
State Implem. CSHCN	\$ 0		\$ 0		\$ 300,000	
MA LEAD/NBS	\$ 0		\$ 882,000		\$ 0	
TBI	\$ 100,000		\$ 100,000		\$ 0	
ECCS	\$ 102,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 149,243,436		\$ 175,932,687		\$ 214,426,528	

FORM NOTES FOR FORM 4

Each year the Budgeted amounts on Form 4 are based on anticipated funding, as best known at the time the application is submitted.

The budgeted state funding is based on the previous state fiscal year's appropriated amounts. However, the amount that is actually approved thru the passage of the state budget may be different, depending on the state of the economy. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

The budgeted federal funds are based on the Notice of Grant Awards plus other anticipated funding opportunities known at the time of the application submission. However, the actual receipt of federal grant awards vs the anticipated receipt of funding may change. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount of federal funding received, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

Each year, the amounts budgeted for the block grant are based on the amount that may be applied for in accordance with the grant guidance. However, there have been times when the grant award received is approved at a different amount. When that occurs, when expenditures are reported in the following application submissions there will be a difference reflected between the budgeted amount and the expended amount. The expended amount will always match the actual grant award, as we always fully expend the block grant award.

All state funding administered by the Bureau of Family Health is specifically designated for particular purposes, such as renal programs, hemophilia programs, etc. In those cases where state funding is for purposes not covered under the block grant, the state resources are the only available means of payment. In the cases where both state and block grant funds could be used to support like services, state dollars are spent first. Once exhausted, then federal funds are applied.

FIELD LEVEL NOTES

1. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: PregWomenExpended

Row Name: Pregnant Women

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

2. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: Children_0_1Expended

Row Name: Infants <1 year old

Column Name: Expended

Year: 2008

Field Note:

Less was spent on Infants <1 year old, but more was spent on Children 1 to 22 years old and Children with Special Healthcare Needs based on our revised spending plan.

3. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: Children_0_1Expended

Row Name: Infants <1 year old

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

4. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: Children_1_22Expended

Row Name: Children 1 to 22 years old

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

5. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: CSHCNExpended

Row Name: CSHCN

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

6. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended

Row Name: All Others

Column Name: Expended

Year: 2008

Field Note:

Less was spent on Others, but more was spent on Children 1 to 22 years old and Children with Special Healthcare Needs based on our revised spending plan.

7. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended

Row Name: All Others

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

8. Section Number: Form4_I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2007

Field Note:

Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: PA

TYPE OF SERVICE	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 22,657,277	\$ 18,499,175	\$ 23,224,961	\$ 18,781,121	\$ 27,191,725	\$ 17,962,492
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 6,704,411	\$ 5,766,978	\$ 7,745,642	\$ 5,212,927	\$ 5,772,321	\$ 3,988,886
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 47,445,373	\$ 45,965,786	\$ 45,731,923	\$ 44,530,065	\$ 45,725,684	\$ 46,268,008
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 14,462,137	\$ 13,884,260	\$ 12,241,026	\$ 14,008,422	\$ 13,373,449	\$ 15,087,157
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535	\$ 92,063,179	\$ 83,306,543

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: PA

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 28,062,798	\$ 24,601,275	\$ 23,513,175	\$	\$ 24,166,375	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 2,962,865	\$ 3,807,550	\$ 2,429,017	\$	\$ 2,082,255	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 46,591,489	\$ 47,547,682	\$ 49,043,234	\$	\$ 48,667,342	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 13,649,027	\$ 14,003,236	\$ 12,941,742	\$	\$ 14,295,029	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 91,266,179	\$ 89,959,743	\$ 87,927,168	\$ 0	\$ 89,211,001	\$ 0

FORM NOTES FOR FORM 5

Each year the Budgeted amounts on Form 5 are based on anticipated funding, as best known at the time the application is submitted.

The budgeted state funding is based on the previous state fiscal year's appropriated amounts. However, the amount that is actually approved thru the passage of the state budget may be different, depending on the state of the economy. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

The budgeted federal funds are based on the Notice of Grant Awards plus other anticipated funding opportunities known at the time of the application submission. However, the actual receipt of federal grant awards vs the anticipated receipt of funding may change. As a result these amounts can fluctuate from year to year. In addition, because the budgeted amount may not be the final approved amount of federal funding received, when expenditures are reported in the following application submissions, variations between budgeted vs expended will occur.

Each year, the amounts budgeted for the block grant are based on the amount that may be applied for in accordance with the grant guidance. However, there have been times when the grant award received is approved at a different amount. When that occurs, when expenditures are reported in the following application submissions there will be a difference reflected between the budgeted amount and the expended amount. The expended amount will always match the actual grant award, as we always fully expend the block grant award.

All state funding administered by the Bureau of Family Health is specifically designated for particular purposes, such as renal programs, hemophilia programs, etc. In those cases where state funding is for purposes not covered under the block grant, the state resources are the only available means of payment. In the cases where both state and block grant funds could be used to support like services, state dollars are spent first. Once exhausted, then federal funds are applied.

FIELD LEVEL NOTES

1. **Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2008
Field Note:
Less was spent than we budgeted for.
2. **Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2007
Field Note:
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
3. **Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2008
Field Note:
More was spent than we budgeted for.
4. **Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2007
Field Note:
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
5. **Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2007
Field Note:
Form 4 & 5 - the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
6. **Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2007
Field Note:
Form 4 & 5 - the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: PA

Total Births by Occurrence: 148,294

Reporting Year: 2008

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	148,474	100.1	26	26	26	100
Congenital Hypothyroidism	148,474	100.1	77	61	61	100
Galactosemia	148,474	100.1	46	19	19	100
Sickle Cell Disease	148,474	100.1	100	93	93	100

Other Screening (Specify)

Congenital Adrenal Hyperplasia (CAH)	148,474	100.1	124	11	11	100
Maple Syrup Urine Disease (MSUD)	148,474	100.1	2	1	1	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Form6_Main
Field Name: BirthOccurence
Row Name: Total Births By Occurrence
Column Name: Total Births By Occurrence
Year: 2010
Field Note:
Total births by occurrence is a preliminary figure from the PA Department of Health, Bureau of Health Statistics and Research.
2. **Section Number:** Form6_Main
Field Name: Phenylketonuria_OneScreenNo
Row Name: Phenylketonuria
Column Name: Receiving at least one screen
Year: 2010
Field Note:
The contract laboratories cannot provide unduplicated filter papers, therefore the number exceeds total births by occurrence
3. **Section Number:** Form6_Main
Field Name: Congenital_OneScreenNo
Row Name: Congenital
Column Name: Receiving at least one screen
Year: 2010
Field Note:
The contract laboratories cannot provide unduplicated filter papers, therefore the number exceeds total births by occurrence
4. **Section Number:** Form6_Main
Field Name: Galactosemia_OneScreenNo
Row Name: Galactosemia
Column Name: Receiving at least one screen
Year: 2010
Field Note:
The contract laboratories cannot provide unduplicated filter papers, therefore the number exceeds total births by occurrence
5. **Section Number:** Form6_Main
Field Name: SickCellDisease_OneScreenNo
Row Name: SickCellDisease
Column Name: Receiving at least one screen
Year: 2010
Field Note:
The contract laboratories cannot provide unduplicated filter papers, therefore the number exceeds total births by occurrence
6. **Section Number:** Form6_Main
Field Name: Phenylketonuria_Confirmed
Row Name: Phenylketonuria
Column Name: Confirmed Cases
Year: 2010
Field Note:
Each presumptive positive result for Phenylketonuria resulted in a diagnosed case

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: PA

Reporting Year: 2008

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	7,008	19.7	2.1	13.0	21.1	44.0
Infants < 1 year old	152,365	0.4	0.2	0.5	0.5	98.4
Children 1 to 22 years old	207,660	0.7	1.7	3.5	5.2	89.0
Children with Special Healthcare Needs	30,350	3.2	7.3	20.5	8.1	60.8
Others	103,893	6.6	6.5	34.4	40.0	12.4
TOTAL	501,276					

FORM NOTES FOR FORM 7

The Bureau does not have a capability to unduplicate numbers between the various divisions or their programs. Three divisions within the Bureau of Family Health have broad Title V responsibilities and each serves multiple categories within the "Types of Individuals Served." The Total Served is the sum of each of the division's "Total" for each of the categories. The data collection capabilities, data collection requirements and tracking capabilities all vary depending on the type of service/program within each Division and come from different vendors and different sources.
Data for "Primary Sources of Coverage" is not collected for some services (such as some telephone calls to the Healthy Baby Line). The percentages in columns "B-E" reflect data that was collected and column "F" reports "unknowns" as well as "data not collected."

Division of Child and Adult Health Services (182,191)

Pregnant Women: 2,924

Infants <1 Year Old: 746

Children 1 to 22 Years Old: 176,537

Children with Special Healthcare Needs: 1,542

Others: 442

Division of Community Systems Development and Outreach (125,358)

Pregnant Women: 2,440

Infants <1 Year Old: 625

Children 1 to 22 Years Old: 9,493

Children with Special Healthcare Needs: 14,209

Others: 98,571

Division of Newborn Screening & Genetics (193,727)

Pregnant Women: 1,644

Infants <1 Year Old: 150,974

Children 1 to 22 Years Old: 21,630

Children with Special Healthcare Needs: 14,599 (include 8,795 from CORE SFY 08-09)

Others: 4,880

FIELD LEVEL NOTES

None

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: PA

Reporting Year: 2008

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	150,507	108,452	22,820	223	5,363	85		13,564
Title V Served	1,568	771	381	0	7	0	7	402
Eligible for Title XIX	58,651	32,957	15,709	102	1,282	36		8,565
INFANTS								
Total Infants in State	148,577	121,109	20,506		5,851			1,111
Title V Served	746	324	338	0	10	0	23	51
Eligible for Title XIX	19,539	13,589	2,142	18	339	4		3,447

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	134,297	13,999	2,211	2,840	200	6,671		4,288
Title V Served	1,020	445	157	74	6	252	3	110
Eligible for Title XIX	50,054	8,597	0					8,597
INFANTS								
Total Infants in State	134,887	13,690	0					13,690
Title V Served	698	48	0	27	0	1	1	19
Eligible for Title XIX	16,439	3,100	0					3,100

FORM NOTES FOR FORM 8

Form 8 requires both information from the PA Department of Health, Bureau of Health Statistics and Research, which is generally only available after a one-year delay, and other program information, which is generally available fairly close to the end of the year in question. In an effort to make our reporting as current as possible, and for the convenience of the disparate program personnel who supply us with data, Form 8 reflects data from reporting periods described below.

Total Deliveries in State include provisional live births for 2008 and final fetal deaths for 2007.

Title V Served is 2008 program data. Title V served for deliveries is number of pregnant and postpartum women served by PA's local Title V agencies. Title V served for infants is also number of infants served by PA's local Title V agencies and by our county health centers.

Total Infants in state is 2007 population data. 2008 population estimates are not yet available.

Eligible for Title XIX is the Pennsylvania Medical Assistance deliveries and births by race for service dates in FFY 2007/2008. Data are from the Fee-for-Service Delivery System and the HealthChoices Mandatory Managed Care Delivery System (data not available for persons in the Voluntary Managed Care Delivery System). Fee-for-Service Delivery System delivery claims were identified as claims with DRG codes between 0370 and 0375. Fee-for-Service Delivery System newborn claims were identified as claims with DRG codes between 0385 and 0391. Source: DPW Enterprise Data Warehouse

FIELD LEVEL NOTES

1. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTotal_More
Row Name: Total Deliveries in State
Column Name: More Than One Race Reported
Year: 2010
Field Note:
NA
2. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2010
Field Note:
NA
3. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTotal_Indian
Row Name: Total Infants in State
Column Name: American Indian or Native American
Year: 2010
Field Note:
NA
4. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTotal_Hawaiian
Row Name: Total Infants in State
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2010
Field Note:
NA - Native Hawaiian or Other Pacific Islander figures included in Asian Population
5. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTotal_More
Row Name: Total Infants in State
Column Name: More Than One Race Reported
Year: 2010
Field Note:
NA
6. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2010
Field Note:
NA
7. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_CentralAmerican
Row Name: Total Deliveries in State
Column Name: Central and South American
Year: 2010
Field Note:
NA
8. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2010
Field Note:
NA
9. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2010
Field Note:
NA
10. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2010
Field Note:
NA

11. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2010
Field Note:
NA
12. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Mexican
Row Name: Total Infants in State
Column Name: Mexican
Year: 2010
Field Note:
NA
13. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Cuban
Row Name: Total Infants in State
Column Name: Cuban
Year: 2010
Field Note:
NA
14. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_PuertoRican
Row Name: Total Infants in State
Column Name: Puerto Rican
Year: 2010
Field Note:
NA
15. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_CentralAmerican
Row Name: Total Infants in State
Column Name: Central and South American
Year: 2010
Field Note:
NA
16. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2010
Field Note:
NA
17. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2010
Field Note:
NA
18. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2010
Field Note:
NA
19. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2010
Field Note:
NA

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: PA

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 986-2229/5437	(800) 986-2229/5437	(800) 986-2229/5437/455	(800) 986-2229/5437	(800) 986-2229/5437
2. State MCH Toll-Free "Hotline" Name	Healthy Baby (HB) Healthy Kids (HK)	Healthy Baby (HB) Healthy Kids (HK)	Healthy Baby(HB) Healthy Kids(HK) MCH Toll Free Hotline(MCH)	Healthy Baby Healthy Kids	Healthy Baby Healthy Kids
3. Name of Contact Person for State MCH "Hotline"	Rodney Shomper	Rodney Shomper	Mary King-Maxey/Peggy	Mary King-Maxey	Mary King-Maxey
4. Contact Person's Telephone Number	(717) 772-2763	(717) 772-2763	(717) 772-2763	(717) 772-2763	(717) 772-2763
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	104,009	116,847	98,149

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: PA

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 986-4550	(800) 986-4550	(800) 986-4550	(800) 986-4550	(800/877) 986-4550
2. State MCH Toll-Free "Hotline" Name	Special Kids Network/Recreation & Leisure Helpline	Special Kids Network/Recreation & Leisure Helpline	Special Kids Network/PA Recreation & Leisure Line	Special Kids Network	Special Kids Network / PA Recreation & Leisure Line
3. Name of Contact Person for State MCH "Hotline"	Peggy Forte	Peggy Forte	Peggy Forte	Jane Mitchell	James Marchaman
4. Contact Person's Telephone Number	(717) 772-2763	(717) 772-2763	717 772-2763	(717) 772-2763	(717) 772-2763
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	5,080	6,025	7,137

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2010
[SEC. 506(A)(1)]
STATE: PA

1. State MCH Administration:
(max 2500 characters)

The Pennsylvania Department of Health's Bureau of Family Health is the State Title V Agency overseeing the MCH Block Grant as well as other initiatives focused on maternal, child and family health. The mission of the BFH is to improve the health of pregnant women, infants, children and CSHCN.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 24,394,001
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 64,817,000
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 0
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 89,211,001

9. Most significant providers receiving MCH funds:

Children's Hospital of Philadelphia
Children's Hospital of Pittsburgh
Philadelphia Department of Public Health
Allegheny County Department of Health

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	7,008
b. Infants < 1 year old	152,365
c. Children 1 to 22 years old	207,660
d. CSHCN	30,350
e. Others	103,893

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

Examples of direct and enabling services provided by the Bureau of Family Health include: Comprehensive Specialty Care Clinic Services for CSHCN, Children's Rehabilitative Services, Family Planning Services, Family Consultant Services, Parent to Parent Services, the Adolescent Health Program, and the Epilepsy and Tourette Syndrome Support Services Program.

b. Population-Based Services:
(max 2500 characters)

Examples of population-based services provided by the Bureau of Family Health include: Childhood Lead Posioning Prevention Program, Sudden Infant Death Syndrome Outreach, Folic Acid Education Program, WIC, and the Newborn Hearing and Metabolic Screening Programs.

c. Infrastructure Building Services:
(max 2500 characters)

Examples of infrastructure building services provided by the Bureau of Family Health include: Special Kids Network, Love'em with a Check-up, PA Recreation and Leisure Line, Early Childhood Education Linkage System, Child Death Review, client eligibility and benefits services, and provider registry services.

12. The primary Title V Program contact person:

Name	Melita J. Jordan, CNM, MSN, APRN C
Title	Director, Bureau of Family Health
Address	7th Fl East, 625 Forster St
City	Harrisburg
State	PA
Zip	17120
Phone	717-787-7192
Fax	717-772-0323
Email	mejordan@state.pa.us
Web	www.health.state.pa.us

13. The children with special health care needs (CSHCN) contact person:

Name	Michelle Connors
Title	Director, Div of Community Systems Development & O
Address	7th Floor East, 625 Forster St
City	Harrisburg
State	PA
Zip	17120
Phone	717-787-2763
Fax	717-772-0323
Email	mconnors@state.pa.us
Web	www. health.state.pa.us



FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: PA

Form Level Notes for Form 11

Pennsylvania does not obtain preliminary annual birth and death statistical files appropriate for updating indicators in the Title V grant application until usually past the July submittal deadline. Preliminary birth and death files are usually available 6 to 12 months after the end of the calendar year and final birth and death files are usually available 12 to 18 months after the end of the calendar year. For example, the preliminary 2008 birth file should be available sometime between July 2009 and December 2009. Therefore, preliminary Pennsylvania birth and death data are not available to meet the July 15 deadline for submitting the Title V Block Grant. When preliminary files are available to meet the mid-September deadline for resubmitting the Block Grant, the appropriate birth and death indicators will be updated with preliminary data. All available preliminary data provided for the mid-September deadline will be updated with final data for the July 15 deadline of the following year. However, birth and death indicators that require detailed population data in their calculations, such as child death rate and teen birth rate, cannot be updated in time to meet the mid-September deadline. Pennsylvania obtains detailed population estimates for a previous (non-census) year to compute vital statistics rates from the state's census affiliate. Those population figures are not provided until approximately October of the following year. For example, the 2008 population estimates for Pennsylvania will be available in October of 2009. Therefore, preliminary data for these population-based indicators cannot be provided by July or September. **IMPORTANT:** Please note that the above dates are provided as rough guidelines for when annual birth and death data files become available. A preliminary 2008 birth file is available and a preliminary 2008 death file is not available as of September 3, 2009.

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
Annual Indicator	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
Numerator	<u>226</u>	<u>212</u>	<u>197</u>	<u>200</u>	<u>211</u>
Denominator	<u>226</u>	<u>212</u>	<u>197</u>	<u>200</u>	<u>211</u>
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <small>(Explain data in a year note. See Guidance, Appendix IX.)</small>					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2008
Field Note:
 Source: Division of Newborn Screening and Genetics
- Section Number:** Form11_Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2007
Field Note:
 Source: Division of Newborn Screening and Genetics
- Section Number:** Form11_Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2006
Field Note:
 Data source: Division of Newborn Screening and Genetics

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	67	69	71	73	73
Annual Indicator	64.8	64.8	64.8	60.6	60.6
Numerator					
Denominator					
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2009	2010	2011	2012	2013
Annual Performance Objective	60.6	60.6	60.6	60.6	60.6
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website. Numerators and denominators are not available. Data for 2004 through 2006 identified the Core Outcome results from the State and Local Area Integrated Telephone Survey (SLAITS) conducted in 2001. Data for 2007 and 2008 is based on the 2005-2006 SLAITS.

2. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.

No denominator or numerator data was available

3. Section Number: Form11_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

No denominator or numerator data was available

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	54	52	53	54	54
Annual Indicator	51.2	51.2	51.2	45.8	45.8
Numerator					
Denominator					
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	45.8	45.8	45.8	45.8	45.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website. Numerators and denominators are not available. Data for 2004 through 2006 identified the Core Outcome results from the State and Local Area Integrated Telephone Survey (SLAITS) conducted in 2001. Data for 2007 and 2008 is based on the 2005-2006 SLAITS.

2. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.

No denominator or numerator data was available

3. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

No denominator or numerator data was available

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	64	66	68	70	70
Annual Indicator	61.4	61.4	61.4	66.2	66.2
Numerator					
Denominator					
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2009	2010	2011	2012	2013
Annual Performance Objective	66.2	66.2	66.2	66.2	66.2
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website. Numerators and denominators are not available. Data for 2004 through 2006 identified the Core Outcome results from the State and Local Area Integrated Telephone Survey (SLAITS) conducted in 2001. Data for 2007 and 2008 is based on the 2005-2006 SLAITS.

2. Section Number: Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.

No denominator or numerator data was available

3. Section Number: Form11_Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

No denominator or numerator data was available

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	76	78	80	82	89.5
Annual Indicator	73.4	73.4	73.4	89.5	89.5
Numerator					
Denominator					
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2009	2010	2011	2012	2013
Annual Performance Objective	89.5	89.5	89.5	89.5	89.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website. Numerators and denominators are not available. Data for 2004 through 2006 identified the Core Outcome results from the State and Local Area Integrated Telephone Survey (SLAITS) conducted in 2001. Data for 2007 and 2008 is based on the 2005-2006 SLAITS.

2. Section Number: Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.

No denominator or numerator data was available

3. Section Number: Form11_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

No denominator or numerator data was available

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	32	34	36	38	48
Annual Indicator	5.8	5.8	5.8	46	46
Numerator					
Denominator					
Data Source					See Field Level note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	46	46	46	46	46
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website. Numerators and denominators are not available. Data for 2004 through 2006 identified the Core Outcome results from the State and Local Area Integrated Telephone Survey (SLAITS) conducted in 2001. Data for 2007 and 2008 is based on the 2005-2006 SLAITS.

2. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.

No denominator or numerator data was available

3. Section Number: Form11_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

No denominator or numerator data was available

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	90	87	87	87	85
Annual Indicator	85.7	83.2	84.6	81.4	80.4
Numerator					
Denominator					
Data Source					See Field Level Note
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	85	86	86	86.5	86.5
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

The Annual Indicators were obtained from the National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Data are for children 19-35 months of age. Numerators and denominators are not available.

Data should be in this form:

2004: 85.7+/-4.0

2005: 83.2+/-5.2

2006: 84.6+/-4.4

2007: 81.4+/-4.1

2008: 80.4+/-4.9

2. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

The Annual Indicators were obtained from the National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Data are for children 19-35 months of age. Numerators and denominators are not available.

Data should be in this form:

2004: 85.7+/-4.0

2005: 83.2+/-5.2

2006: 84.6+/-4.4

2007: 81.4+/-4.1

3. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2006**Field Note:**

The Annual Performance indicator for 2003, 2004, 2005 and 2006 was obtained from the 2003, 2004, 2005 and 2006 National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Data are for children 19-35 months of age. Numerators and denominators are not available.

Data should be in this form:

2003: 86.2+/-4.1

2004: 85.7+/-4.0

2005: 83.2+/-5.2

2006: 84.6+/-4.4

Data for 2006 will not be available until later in the year 2007.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	15	14	13	12	15.3
Annual Indicator	15.7	15.4	16.0	16.1	
Numerator	4,198	4,162	4,313	4,313	
Denominator	267,596	269,471	270,122	267,102	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	15.1	14.9	14.9	14.7	14.7

Annual Indicator**Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

Annual Performance Objective will remain unchanged until new trending data are available. The rate of birth spiked in 2006 and 2007.

2. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	34	38	38	38	30
Annual Indicator	23.2	25.3	29.5	25.8	25.8
Numerator	10,491	11,510	13,895	15,248	15,248
Denominator	45,177	45,576	47,061	59,114	59,114
Data Source					See Field Level Note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	26	27	27.5	27.5	28
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator is number of Medicaid enrollees who are 8 years old as of 09/30/08 who have a protective sealant on at least one permanent molar tooth, based on paid dental claims. The denominator is the number of Medicaid enrollees who are 8 years old as of 09/30/08.

Source: PA Department of Public Welfare

Annual Performance Objectives changed from prior years to reflect current trending.

2. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator is number of Medicaid enrollees who are 8 years old as of 09/30/08 who have a protective sealant on at least one permanent molar tooth, based on paid dental claims. The denominator is the number of Medicaid enrollees who are 8 years old as of 09/30/08.

Source: PA Department of Public Welfare

3. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2006**Field Note:**

Numerator is number of Medicaid enrollees who are 8 years old as of 09/30/07 who have a protective sealant on at least one permanent molar tooth, based on paid dental claims. The denominator is the SFY monthly average of Medicaid enrollees who are 8 years old.

Numerator and denominator source: PA Department of Public Welfare.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.1	2.5	2.4	2.3	2.3
Annual Indicator	2.5	2.3	2.9	2.2	
Numerator	59	54	66	50	
Denominator	2,339,033	2,326,570	2,313,503	2,299,158	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	2.3	2.3	2.3	2.3	2.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2008

Field Note:

Data Not available. Usually these data are available 12 to 18 months from the close of the calendar year.

No change to Annual Performance Objectives as it is too early to discern if decreasing trend will continue.

2. Section Number: Form11_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form11_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	35	35	38.5	40	40
Annual Indicator	32.7	37.5	35.8		
Numerator					
Denominator					
Data Source					

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	37.5	37.5	37.5	37.5	37.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2008

Field Note:

2006 birth data should become available in 2009/2010. Data delay as CDC is developing a new system of data collection by year of birth. These data are collected over a 3-yr period and final data are available 4 yrs from date of birth.

The Performance Objectives have been lowered as an increased number of WIC births impacted the duration rate of total population.

2. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2007

Field Note:

2006 birth data should become available in 2009/2010. Data delay as CDC is developing a new system of data collection by year of birth. These data are collected over a 3-yr period and final data are available 4 yrs from date of birth.

The Annual Indicators were obtained from the National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Numerators and denominators are not available.

Data should be in this form:

2004: 32.7+/-4.9

2005: 37.5 +/-5.2

3. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2006

Field Note:

The Annual Indicator was obtained from the National Immunization Survey conducted by the National Center for Health Statistics Centers for Disease Control and Prevention. Numerators and Denominators are not available.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	85	98	98	98	98
Annual Indicator	98.4	98.0	98.0	98.1	97.9
Numerator	138,750	138,495	141,791	143,353	141,532
Denominator	141,013	141,341	144,749	146,191	144,564
Data Source					See Field Level Note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	98.3	98.4	98.5	98.6	98.7
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator source: Division of Newborn Screening and Genetics

Denominator source: PA Department of Health, Bureau of Health Statistics and Research

2. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator source: Division of Newborn Screening and Genetics

Denominator source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2006**Field Note:**

Numerator

data source: Division of Newborn Screening and Genetics

Birth figures (denominator) are final births in hospitals supplied by the PA Department of Health, Bureau of Health Statistics and Research.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	6.2	9.2	9.2	9.1	7.3
Annual Indicator	10.2	8.3	7.3	7.5	
Numerator	291,000	235,000	203,000	207,000	
Denominator	2,844,000	2,830,000	2,778,000	2,775,000	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	7.5	7.5	7.5	7.4	7.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form11_Performance Measure #13

Field Name: PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data not available. Usually these data are available 9 months from the close of the calendar year.

2. **Section Number:** Form11_Performance Measure #13

Field Name: PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

Percent and denominator are from Table HI-5, Health Insurance Coverage Status and Type of Coverage by State, Children Under 18, prepared by the U.S. Census Bureau. The numerator was calculated using the data from Table HI-5. PA has chosen to use the U.S. Census Bureau data because we believe it is the most consistent, reliable, and objective data available to us. The U.S. Census Bureau data for 2008 will not be available until September of 2009, so there will be a gap in our reporting on these figures. The data for year 2004 were revised based on improvements to the algorithm that assigned coverage to dependents, and there was an adjustment to the weights.

3. **Section Number:** Form11_Performance Measure #13

Field Name: PM13**Row Name:****Column Name:****Year:** 2006**Field Note:**

Percent and denominator are from Table HI-5, Health Insurance Coverage Status and Type of Coverage by State, Children Under 18, prepared by the U.S. Census Bureau. The numerator was calculated using the data from Table HI-5. PA has chosen to use the U.S. Census Bureau data because we believe it is the most consistent, reliable, and objective data available to us. The U.S. Census Bureau data for 2007 will not be available until September of 2008, so there will be a gap in our reporting on these figures. The data for year 2004 were revised based on improvements to the algorithm that assigned coverage to dependents, and there was an adjustment to the weights.

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	13.5	13.9	13.8	13.7	13.6
Annual Indicator	25.8	25.0	24.7	24.2	25.8
Numerator	26,828	25,787	25,570	25,337	28,865
Denominator	103,968	103,151	103,524	104,699	111,879
Data Source					See Field Level note
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	13.5	13.4	13.4	13.4	13.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: CDC Pediatric Nutrition Surveillance System

2. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: CDC Pediatric Nutrition Surveillance System

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective			14.2	14	14
Annual Indicator			13.7	13.8	13.6
Numerator			19,559	19,786	19,395
Denominator			142,397	143,897	143,099
Data Source					See Field Level Note
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	13.4	13.1	12.8	12.5	12.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2008
Field Note:
 Unknowns excluded in calculations.
 Source: PA Department of Health, Bureau of Health Statistics
- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2007
Field Note:
 Unknowns excluded in calculations.
 Source: PA Department of Health, Bureau of Health Statistics
- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2006
Field Note:
 Unknowns excluded in calculations.
 Source: PA Department of Health, Bureau of Health Statistics

Unable to enter 2004 and 2005 data as follows:

Data for 2004
 Annual Performance Indicator 14.1
 Numerator 19,423
 Denominator 138,077

Data for 2005
 Annual Performance Indicator 14.0
 Numerator 19,516
 Denominator 138,988

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	6.2	8.2	8.1	6	5.2
Annual Indicator	7.3	6.2	5.4	5.1	
Numerator	67	57	50	47	
Denominator	918,572	924,662	928,078	926,505	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	5.1	5.1	5	5	5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

No change to Annual Performance Objectives. Annual indicators are in line with APOs.

2. Section Number: Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	70	80.1	81.9	82.5	82.5
Annual Indicator	76.1	76.0	81.1	82.1	77.9
Numerator	1,736	1,727	1,942	1,963	1,893
Denominator	2,282	2,272	2,394	2,390	2,430
Data Source					See Field Level Note
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?	Final				Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>82.7</u>	<u>82.7</u>	<u>82.9</u>	<u>82.9</u>	<u>82.9</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

2. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and research

2004 data have been revised as of April 26, 2007

3. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	86	83	83.5	84	81
Annual Indicator	81.3	81.1	80.1	79.6	79.4
Numerator	97,316	97,194	96,697	95,872	98,657
Denominator	119,668	119,787	120,770	120,471	124,291

Data Source

See Field Level Note

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	79.6	79.8	79.9	79.9	80
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2008**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

Annual Performance Objectives changed from prior years to reflect current downward trending.

2. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2007**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2006**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

STATE PERFORMANCE MEASURE # 5

Percent of callers who have expressed satisfaction with the services provided by the Special Kids Network Helpline.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective			100	92	92
Annual Indicator		94.3	90.3	91.9	94.2
Numerator		482	167	406	311
Denominator		511	185	442	330
Data Source					See Field Level note
Is the Data Provisional or Final?				Final	Final
<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	94.2	94.6	95	95.2	95.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Division of Community Systems Development and Outreach

The satisfaction rate during calendar year 2008 is based on responses from families and professionals to the question, "Would you call the Special Kids Network again?"

2. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2006**Field Note:**

1,695 surveys were sent to callers by the Health and Human Services Call Center (HHSCC) from September thru December 2006, and mailing continues in 2007. Professional surveys were not mailed in calendar year 2006, but will be sent during calendar year 2007.

Historically, MCH Block Grant satisfaction rate was based on a positive response to question #9 of the survey. The following data reflects the outcome of responses to this question:

"Would you recommend the Special Kids Network to someone you know?"

Objective 100% Satisfied Callers.

Percentage of Respondents Satisfied:

Numerator: respondents who stated they were satisfied

Denominator: total survey respondents

Percentage of satisfied callers for Calendar year 2006: (90.3%)

STATE PERFORMANCE MEASURE # 6

Rate of infant deaths as a result of Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed per 1,000 live births.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			0.5	0.5	0.5
Annual Indicator	0.7	0.5	0.4	0.6	
Numerator	100	73	59	93	
Denominator	144,194	145,033	148,706	150,322	
Data Source					
Is the Data Provisional or Final?	Final				

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>0.5</u>	<u>0.5</u>	<u>0.5</u>	<u>0.5</u>	<u>0.5</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

APO will remain unchanged as it is too early to discern if upward spike in 2007 will continue.

2. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

STATE PERFORMANCE MEASURE # 9

The rate of pregnancy (per 1,000) among females ages 15-17

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective					22.3
Annual Indicator		22.3	23.6	23.9	
Numerator		6,016	6,370	6,385	
Denominator		269,471	270,122	267,102	
Data Source					
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	23.9	23.6	23.5	23	23
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

Annual Performance Objectives changed from prior years to reflect current trending.

2. Section Number: Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2006**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

STATE PERFORMANCE MEASURE # 10

Percent of children ages 6 years and younger tested for elevated blood lead levels

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective					13
Annual Indicator			10.7	12.7	13.4
Numerator			109,894	130,954	137,878
Denominator			1,031,796	1,030,272	1,031,382
Data Source					See Field Level note
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>13.8</u>	<u>13.8</u>	<u>14</u>	<u>15</u>	<u>16.5</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator source: PA NEDSS

Denominator is an estimate not produced by the PA State Data Center.

APO changed for 2009 and 2010 to reflect current trending and expanded programming.

2. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator source: PA NEDSS

Denominator source: PA State Data Center

3. Section Number: Form11_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2006**Field Note:**

Numerator data source: PA NEDSS

Denominator Source: PA State Data Center.

STATE PERFORMANCE MEASURE # 11

The percent of tested children ages 6 years and younger with confirmed elevated blood lead levels.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective					2.3
Annual Indicator				2.3	2.2
Numerator				3,026	2,996
Denominator				130,954	137,878
Data Source					See Field Level note
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>2.3</u>	<u>2.2</u>	<u>2.2</u>	<u>2.1</u>	<u>2</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: PA NEDSS

2. Section Number: Form11_State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: PA NEDSS

3. Section Number: Form11_State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: PA NEDSS

STATE PERFORMANCE MEASURE # 12

The percentage of statewide breastfeeding initiation

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective					67
Annual Indicator		63.7	64.6	65.4	66.5
Numerator		86,720	90,282	92,712	94,789
Denominator		136,168	139,794	141,705	142,543
Data Source					See Field Level Note
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	68	69	70	71	72
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_State Performance Measure #12
Field Name: SM12
Row Name:
Column Name:
Year: 2008
Field Note:
 Source: PA Department of Health, Bureau of Health Statistics and Research
- Section Number:** Form11_State Performance Measure #12
Field Name: SM12
Row Name:
Column Name:
Year: 2007
Field Note:
 Source: PA Department of Health, Bureau of Health Statistics and Research
- Section Number:** Form11_State Performance Measure #12
Field Name: SM12
Row Name:
Column Name:
Year: 2006
Field Note:
 Source: PA Department of Health, Bureau of Health Statistics and Research.

STATE PERFORMANCE MEASURE # 13

The percentage of infants with failed hearing screenings that are lost to follow-up

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective					19.5
Annual Indicator		19.3	20.7	15.9	
Numerator		271	290	220	
Denominator		1,402	1,400	1,383	
Data Source					
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	15.9	15.7	15.5	15.3	15.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data not available because of a 1 year turn-around time in final data.

TVIS does not allow a change of objective for 2008, however, to bring objectives in line with improved lost to follow up rates, the objectives for 2009-2013 have been updated.

2. Section Number: Form11_State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Division of Newborn Screening and Genetics

3. Section Number: Form11_State Performance Measure #13**Field Name:** SM13**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Division of Newborn Screening and Genetics

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: PA

Form Level Notes for Form 12

Pennsylvania does not obtain preliminary annual birth and death statistical files appropriate for updating indicators in the Title V grant application until usually past the July submittal deadline. Preliminary birth and death files are usually available 6 to 12 months after the end of the calendar year and final birth and death files are usually available 12 to 18 months after the end of the calendar year. For example, the preliminary 2008 birth file should be available sometime between July 2009 and December 2009. Therefore, preliminary Pennsylvania birth and death data are not available to meet the July 15 deadline for submitting the Title V Block Grant. When preliminary files are available to meet the mid-September deadline for resubmitting the Block Grant, the appropriate birth and death indicators will be updated with preliminary data. All available preliminary data provided for the mid-September deadline will be updated with final data for the July 15 deadline of the following year. However, birth and death indicators that require detailed population data in their calculations, such as child death rate and teen birth rate, cannot be updated in time to meet the mid-September deadline. Pennsylvania obtains detailed population estimates for a previous (non-census) year to compute vital statistics rates from the state's census affiliate. Those population figures are not provided until approximately October of the following year. For example, the 2008 population estimates for Pennsylvania will be available in October of 2009. Therefore, preliminary data for these population-based indicators cannot be provided by July or September. **IMPORTANT:** Please note that the above dates are provided as rough guidelines for when annual birth and death data files become available. A preliminary 2008 birth file is available and a preliminary 2008 death file is not available as of September 3, 2009.

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	6.7	7.2	7.1	7	7
Annual Indicator	7.1	7.2	7.5	7.5	
Numerator	1,026	1,047	1,122	1,123	
Denominator	144,194	145,033	148,706	150,322	

Data Source

- Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	7.5	7.5	7.5	7.5	7.5

Annual Indicator

Numerator

Denominator

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2007

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2006

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	2	2.4	2.3	2.2	2.7
Annual Indicator	2.4	2.5	2.7	2.7	
Numerator	15	15.7	17	17	
Denominator	6.3	6.3	6.3	6.2	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2.7	2.6	2.6	2.5	2.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2007

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2006

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	4.7	5.3	5	4.8	4.6
Annual Indicator	4.8	5.1	5.4	4.9	
Numerator	692	742	806	739	
Denominator	144,194	145,033	148,706	150,322	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	4.6	4.6	4.6	4.6	4.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	1.5	1.9	1.9	1.8	1.8
Annual Indicator	2.3	2.1	2.1	2.6	
Numerator	334	305	316	384	
Denominator	144,194	145,033	148,706	150,322	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2.5	2.5	2.4	2.4	2.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2007

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form12_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2006

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	10.1	7.4	7.2	7.1	7
Annual Indicator	6.6	7.2	7.1	7.0	
Numerator	958	1,047	1,063	1,052	
Denominator	144,567	145,460	149,098	150,756	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	7	7	7	7	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2007

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research

3. Section Number: Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2006

Field Note:

Source: PA Department of Health, Bureau of Health Statistics and Research.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	18.5	18	17.5	17	17
Annual Indicator	18.6	18.7	17.4	17.9	
Numerator	409	408	377	384	
Denominator	2,193,086	2,181,508	2,169,424	2,150,581	

Data Source

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	17.5	17.5	17.3	17.3	17.1

Annual Indicator**Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form12_Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form12_Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: PA

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

2

Total Score: 15

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: PA FY: 2010

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Promote the healthy development of children through Newborn Screening, and improving early identification of heritable disorders and genetic susceptibilities.
2. Expand the number of medical homes serving all children statewide.
3. Increase coordination of systems, services and programs serving CSHCN.
4. Increase lead testing among children under age 6
5. Increase family participation in decision making, programming and statewide policy.
6. Increase statewide breastfeeding initiation and duration.
7. Increase the number of high risk, vulnerable youth who have access to comprehensive health care.
8. Reduce pregnancy among females ages 15-17.
9. Increase percent of pregnant women, including those at high risk, who receive early and adequate prenatal care.
10. Reduce risk factors (individual, family, peer, school, community) and increase protective factors for youth

FORM NOTES FOR FORM 14

During calendar year 2007, the Bureau developed a Strategic Plan and established new priorities and state performance measures. See Section III, State Overview, Overview for more detail. The TVIS system can only record up to 10 priority needs, but PA has 13 priority needs. Please see below the three remaining.

11. Develop a comprehensive, cohesive statewide MCH policy.
12. Reduce health disparities through the provision of culturally, cognitively, and linguistically appropriate services.
13. Reduce health risks for, and mortality of infants and children.

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: PA

APPLICATION YEAR: 2010

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	Data-related Issues - Needs Assessment If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Assistance is requested during the priority selection stage of the Title V Needs and Capacity Assessment.	To better obtain consensus when determining the Top 10 to 15 MCH priorities.	TA assistance is requested by HRSA
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

The technical assistance (TA) items listed on this form are the unique areas that the Bureau believes should receive special attention and effort during the coming next year.

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: PA

SP # 5

PERFORMANCE MEASURE:

Percent of callers who have expressed satisfaction with the services provided by the Special Kids Network Helpline.

STATUS:

Active

GOAL

To increase the percentage of callers to the SKN who are satisfied with the services provided by SKN.

DEFINITION

.

Numerator:

Number of completed calls to the SKN that resulted in a satisfactory survey response.

Denominator:

Number of completed calls to the SKN.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-23

Increase the number of states that have service systems for children with special health care needs.

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DATA SOURCES AND DATA ISSUES

Health and Human Services Call Center

SIGNIFICANCE

Parents/guardians with children who have special health care needs are more likely to obtain the needed services if they have access to or are aware of a public system that will provide reliable and relevant information and referral services in a fast and efficient manner.

SP # 6

PERFORMANCE MEASURE:

Rate of infant deaths as a result of Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed per 1,000 live births.

STATUS:

Active

GOAL

To reduce the infant death rate due to SIDS and accidental suffocation and strangulation in bed to .50 per 1,000 live births.

DEFINITION

Numerator:

Number of infant (under age 1 year) deaths due to SIDS and accidental suffocation and strangulation in bed.

Denominator:

Number of resident live births in the State in the calendar year

Units: 1000 **Text:** Rate

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-1h

Reduce deaths from sudden infant death syndrome (SIDS) to 0.25 per 1,000

DATA SOURCES AND DATA ISSUES

State vital records.

SIGNIFICANCE

SIDS is the leading cause of postneonatal death among all racial and ethnic groups. A reduction in the rate of death from SIDS will contribute greatly to reducing the overall infant mortality rate. Babies are safest sleeping alone, on their backs in uncluttered cribs. Babies who are not put to sleep safely are at risk of suffocation or strangulation. In some areas of the State, more babies have died in co-sleeping environments than as a result of child abuse.

SP # 9

PERFORMANCE MEASURE:

The rate of pregnancy (per 1,000) among females ages 15-17

STATUS:

Active

GOAL

To reduce the rate of pregnancies among females ages 15-17

DEFINITION

Pregnant females ages 15-17

Numerator:

Number of resident pregnancies among females ages 15-17

Denominator:

Number of resident females ages 15-17

Units: 1000 **Text:** Rate

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 9-7

Reduce pregnancies among adolescent females

DATA SOURCES AND DATA ISSUES

State Vital records and census data are source

SIGNIFICANCE

Teen pregnancy rates in Pennsylvania have been declining; however, there are significant racial and ethnic disparities in the teen pregnancy rates. From 2000-2004 the overall teen pregnancy rate for PA residents ages 15-17 decreased from 28.1 to 23.0. However, there are significant racial/ethnic disparities. In 2004 the teen pregnancy rate (15-17 year olds) for white teens was 12.9, for black teens 71.5 and for Hispanic teens 67.2.

SP # 10

PERFORMANCE MEASURE:

Percent of children ages 6 years and younger tested for elevated blood lead levels

STATUS:

Active

GOAL

To increase the percent of children ages 6 years and younger who are tested for lead poisoning.

DEFINITION

Percent of Pennsylvania children ages 6 years and younger tested for elevated blood lead levels

Numerator:

Number of children ages 6 years and younger tested for lead poisoning

Denominator:

Number of children ages 6 years and younger

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 8-11

Eliminate elevated blood lead levels in children

DATA SOURCES AND DATA ISSUES

PA NEDSS and Bureau of Health Statistics (population data)

SIGNIFICANCE

Considerable progress has been made in reducing blood lead levels in Pennsylvania's children. However, lead poisoning, which is a preventable environmental health problem and children are the most susceptible to the adverse health, neurological and behavioral reactions from exposure to lead-containing products. An elevated blood lead can cause mental retardation, learning disabilities, and behavioral problems in children. In some cases, high blood levels can cause seizures, coma and even death.

SP # 11

PERFORMANCE MEASURE:

The percent of tested children ages 6 years and younger with confirmed elevated blood lead levels.

STATUS:

Active

GOAL

Decrease the number of children ages 6 years and younger with confirmed elevated blood lead levels

DEFINITION

The percent of tested Pennsylvania children ages 6 years and younger with confirmed elevated blood lead levels.

Numerator:

Number of children ages 6 years and younger with confirmed elevated blood lead levels

Denominator:

Number of children ages 6 years and younger tested

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 8-11 Eliminate elevated blood lead levels in children

DATA SOURCES AND DATA ISSUES

PA NEDSS

SIGNIFICANCE

Considerable progress has been made in reducing blood lead levels in Pennsylvania's children. However, lead poisoning, which is a preventable environmental health problem and children are the most susceptible to the adverse health, neurological and behavioral reactions from exposure to lead-containing products. An elevated blood lead can cause mental retardation, learning disabilities, and behavioral problems in children. In some cases, high blood levels can cause seizures, coma and even death.

SP # 12

PERFORMANCE MEASURE:

The percentage of statewide breastfeeding initiation

STATUS:

Active

GOAL

To increase statewide breastfeeding initiation

DEFINITION

Number of resident Pennsylvania women who initiate breastfeeding annually

Numerator:

Number of resident women who initiate breastfeeding annually

Denominator:

Number of resident live births annually

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-19a

Increase the proportion of mothers who breastfeed their babies in early postpartum period

DATA SOURCES AND DATA ISSUES

Pennsylvania Birth Certificate, WIC, CDC PedNSS Report

SIGNIFICANCE

The advantages of breastfeeding are indisputable and include nutritional, immunological and psychological benefits to both infant and mother, as well as economic benefits. In 2005, Pennsylvania ranked 35th in the nation, and 40th place in 2006 in the percentage of children ever breastfed (National Center for Chronic Disease Prevention and Health Promotion National Immunization Survey). Significant racial differences exist in Pennsylvania's breastfeeding initiation rates. African-Americans are Pennsylvania's largest minority group, comprising 15% of the state's births. In 2006, this group has the lowest initiation rate of 51%. Hispanics, comprising 8% of births has an initiation rate of 63%.

SP # 13

PERFORMANCE MEASURE:

The percentage of infants with failed hearing screenings that are lost to follow-up

STATUS:

Active

GOAL

Decrease the percentage of infants that have a failed hearing screening that are not followed to conclusion

DEFINITION

The percentage of Pennsylvania infants that have a failed hearing screening that are not followed to conclusion

Numerator:

number of infants lost to follow-up

Denominator:

number of infants failing re-screening

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 28-11

Increase the proportion of newborns who are screened for hearing loss by age 1 month, have audiologic evaluation by age 3 months, and are enrolled in appropriate intervention services by age 6 months. (Developmental) Increase the proportion of newborns who are screened for hearing loss by age 1 month, have audiologic evaluation by age 3 months, and are enrolled in appropriate intervention services by age 6 months.

DATA SOURCES AND DATA ISSUES

Newborn Hearing Screening Program and Newborn Screening Data system

SIGNIFICANCE

The advantages of early detection of hearing impairments are indisputable and include necessary follow-up of free and appropriate enrollment in habilitation and education programs. The national lost to follow-up rate is over 50% and PA is about 12%; our goal is reduce the % to 0.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: PA

Form Level Notes for Form 17

Pennsylvania does not obtain preliminary annual birth and death statistical files appropriate for updating indicators in the Title V grant application until usually past the July submittal deadline. Preliminary birth and death files are usually available 6 to 12 months after the end of the calendar year and final birth and death files are usually available 12 to 18 months after the end of the calendar year. For example, the preliminary 2008 birth file should be available sometime between July 2009 and December 2009. Therefore, preliminary Pennsylvania birth and death data are not available to meet the July 15 deadline for submitting the Title V Block Grant. When preliminary files are available to meet the mid-September deadline for resubmitting the Block Grant, the appropriate birth and death indicators will be updated with preliminary data. All available preliminary data provided for the mid-September deadline will be updated with final data for the July 15 deadline of the following year. However, birth and death indicators that require detailed population data in their calculations, such as child death rate and teen birth rate, cannot be updated in time to meet the mid-September deadline. Pennsylvania obtains detailed population estimates for a previous (non-census) year to compute vital statistics rates from the state's census affiliate. Those population figures are not provided until approximately October of the following year. For example, the 2008 population estimates for Pennsylvania will be available in October of 2009. Therefore, preliminary data for these population-based indicators cannot be provided by July or September. **IMPORTANT:** Please note that the above dates are provided as rough guidelines for when annual birth and death data files become available. A preliminary 2008 birth file is available and a preliminary 2008 death file is not available as of September 3, 2009.

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	49.3	43.4	47.1	45.3	
Numerator	3,600	3,170	3,442	3,322	
Denominator	730,462	731,167	731,116	732,956	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar year.

2. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

ICD-9CM Codes for primary diagnosis.

Numerator source: PA Health Care Cost Containment Council

Denominator source: PA State Data Center

3. Section Number: Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2006

Field Note:

HSCI #01: ICD-9CM Codes for primary diagnosis.

Numerator source: PA Health Care Cost Containment Council. Denominator source: PA State Data Center.

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>80.4</u>	<u>81.7</u>	<u>75.4</u>	<u>80.0</u>	<u>80.0</u>
Numerator	<u>53,246</u>	<u>56,096</u>	<u>56,739</u>	<u>59,604</u>	<u>59,604</u>
Denominator	<u>66,211</u>	<u>68,651</u>	<u>75,220</u>	<u>74,502</u>	<u>74,502</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2008

Field Note:

Numerator data is from the CMS416 Report for the service date period 10/01/07 – 09/30/08. The denominator is the number of Medicaid enrollees who are less than one year old as of 09/30/08.

Source: PA Department of Public Welfare

2. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator data is from the CMS416 Report for the service date period 10/01/07 – 09/30/08. The denominator is the number of Medicaid enrollees who are less than one year old as of 09/30/08.

Source: PA Department of Public Welfare

3. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2006

Field Note:

Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2006 – 09/30/2007. The denominator is the SFY monthly average of Medicaid enrollees who are less than one year old.

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (CHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>42.6</u>	<u>53.0</u>	<u>62.8</u>	<u>66.5</u>	<u>75.2</u>
Numerator	<u>578</u>	<u>683</u>	<u>787</u>	<u>968</u>	<u>1,359</u>
Denominator	<u>1,357</u>	<u>1,289</u>	<u>1,253</u>	<u>1,455</u>	<u>1,807</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2008

Field Note:

Data are provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/07 to 09/30/08.

Source: PA Department of Insurance

2. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator and denominator were provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/06 to 09/30/07.

Source: PA Department of Insurance

3. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2006

Field Note:

HSCI #03: Numerator and Denominator were provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/05 to 09/30/06.

Source: PA Department of Insurance

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>65.6</u>	<u>66.6</u>	<u>66.0</u>	<u>65.6</u>	<u>66.4</u>
Numerator	<u>74,663</u>	<u>75,623</u>	<u>75,410</u>	<u>75,142</u>	<u>78,938</u>
Denominator	<u>113,779</u>	<u>113,626</u>	<u>114,297</u>	<u>114,467</u>	<u>118,960</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2008

Field Note:

Calculated with missing data (adequacy measure could not be computed) removed from denominator.

2004 data have been revised as of April 26, 2007.

Source: PA Department of Health, Bureau of Health Statistics and Research

2. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

Calculated with missing data (adequacy measure could not be computed) removed from denominator.

2004 data have been revised as of April 26, 2007.

Source: PA Department of Health, Bureau of Health Statistics and Research

3. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2006

Field Note:

HSCI #04: Calculated with missing data (adequacy measure could not be computed) removed from denominator.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>86.6</u>	<u>92.0</u>	<u>88.9</u>	<u>74.9</u>	<u>74.9</u>
Numerator	<u>833,010</u>	<u>874,776</u>	<u>882,745</u>	<u>833,162</u>	<u>833,162</u>
Denominator	<u>962,085</u>	<u>950,670</u>	<u>993,176</u>	<u>1,112,818</u>	<u>1,112,818</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes**1. Section Number:** Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator is based on claims having a date of service during the period 10/01/07 to 09/30/08, regardless of the claim adjudication date or payment date. Numerator is the number of children age 0 to 20 who received a service approved by MA either through the Fee-for-Service or Managed Care Delivery System. DPW cannot provide a number for children potentially eligible for MA who did not apply. The denominator is the number of children who have been determined to be eligible for MA who are age 0 to 20 during the reporting period.

Source: PA Department of Public Welfare

2. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator is based on claims having a date of service during the period 10/01/07 to 09/30/08, regardless of the claim adjudication date or payment date. Numerator is the number of children age 0 to 20 who received a service approved by MA either through the Fee-for-Service or Managed Care Delivery System. DPW cannot provide a number for children potentially eligible for MA who did not apply. The denominator is the number of children who have been determined to be eligible for MA who are age 0 to 20 during the reporting period.

Source: PA Department of Public Welfare

3. Section Number: Form17_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2006**Field Note:**

HSCI #07A: Numerator is provided by the PA Department of Public Welfare, from their Enterprise Data Warehouse based on claims having a date of service during the period 10/01/06 to 09/30/07, regardless of the claim adjudication date or payment date. Numerator is the number of children age 0 to 20 who received a service approved by MA either through the Fee-for-Service or Managed Care Delivery System. DPW cannot provide a number for children potentially eligible for MA who did not apply. The denominator is the number of children who have been determined to be eligible for MA who are age 0 to 20 during the reporting period.

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>37.9</u>	<u>38.6</u>	<u>38.3</u>	<u>41.4</u>	<u>40.3</u>
Numerator	<u>69,373</u>	<u>76,564</u>	<u>79,334</u>	<u>86,749</u>	<u>85,267</u>
Denominator	<u>183,039</u>	<u>198,133</u>	<u>206,929</u>	<u>209,765</u>	<u>211,661</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

- Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2008

Field Note:

Data are from the CMS416 Report for the service date period 10/01/2007 – 09/30/2008. Note - the numerator data was updated after CMS416 Report was released.

Source: PA Department of Public Welfare

- Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2007

Field Note:

HSCI #07B: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2005 – 09/30/2006.

- Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2006

Field Note:

HSCI #07B: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2005 – 09/30/2006.

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>0.0</u>	<u>0.0</u>	<u>0.1</u>	<u>0.0</u>	<u>0.0</u>
Numerator	<u>3</u>	<u>9</u>	<u>58</u>	<u>7</u>	<u>18</u>
Denominator	<u>58,360</u>	<u>57,809</u>	<u>56,556</u>	<u>54,477</u>	<u>56,237</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2008

Field Note:

Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 08-09).

Denominator is number of children receiving SSI payments in PA as of December 2008, the Social Security Administration's December 2008 report at <http://www.hrtw.org/youth/data.html#ssi08>

2. Section Number: Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2007

Field Note:

Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 07-08).

Denominator is number of children receiving SSI payments in PA as of December 2007, the Social Security Administration's December 2007 report.

3. Section Number: Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2006

Field Note:

Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 06-07).

Denominator is number of children receiving SSI payments in PA as of December 2006, the Social Security Administration's December 2006 report.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: PA

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2008	Payment source from birth certificate	<u>10.4</u>	<u>7.1</u>	<u>8.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Other	<u>0</u>	<u>0</u>	<u>7.5</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2008	Payment source from birth certificate	<u>69.4</u>	<u>84.3</u>	<u>79.4</u>
d) <i>Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2008	Payment source from birth certificate	<u>63.4</u>	<u>68</u>	<u>66.4</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: PA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2007	<u>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>18</u>) (Age range <u> </u> to <u> </u>)	2007	<u>133</u> <u>100</u> <u> </u>
c) <i>Pregnant Women</i>	2007	<u>185</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: PA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2007	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>18</u>) (Age range <u> </u> to <u> </u>)	2007	<u>200</u> <u>200</u> <u> </u>
c) <i>Pregnant Women</i>	2007	<u> </u>

FORM NOTES FOR FORM 18

HSCI #06 - Medicaid information is from PA Department of Public Welfare. CHIP information is from PA Department of Insurance. Medicaid and CHIP information is current eligibility.

The percent of poverty level for eligibility in PA's Subsidized 1 CHIP program is 201% - 250% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 2 CHIP program is 251% - 275% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 3 CHIP program is 276% - 300% FPL regardless of age.

Note: Children in CHIP Subsidized 1 program pay 25% of the premium, 35% of the premium in Subsidized 2, and 40% of the premium in Subsidized 3.

FIELD LEVEL NOTES

1. **Section Number:** Form18_Indicator 06 - SCHIP
Field Name: SCHIP_Infant
Row Name: Infants
Column Name:
Year: 2010
Field Note:
The percent of poverty level for eligibility in PA's Free CHIP program for infants under 1 is 185%-200% of the Federal Poverty Level (FPL).
2. **Section Number:** Form18_Indicator 06 - SCHIP
Field Name: SCHIP_Children
Row Name: SCHIP Children
Column Name:
Year: 2010
Field Note:
The percent of poverty level for eligibility in PA's Free CHIP program for children 1-5 is 133% - 200% FPL.

The percent of poverty level for eligibility in PA's Free CHIP program for children 6-18 is 100% - 200% FPL.
3. **Section Number:** Form18_Indicator 06 - SCHIP
Field Name: SCHIP_Women
Row Name: Pregnant Women
Column Name:
Year: 2010
Field Note:
SCHIP coverage is non-applicable for pregnant women.
4. **Section Number:** Form18_Indicator 05
Field Name: LowBirthWeight
Row Name: Percent of ow birth weight (<2,500 grams)
Column Name:
Year: 2010
Field Note:
2008 data are provisional
5. **Section Number:** Form18_Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2010
Field Note:
The Title V program does not have the capability to break the data into Medicaid and non-Medicaid for this section.
6. **Section Number:** Form18_Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2010
Field Note:
2008 data are provisional
7. **Section Number:** Form18_Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2010
Field Note:
2008 data are provisional

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: PA

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	1	No
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	1	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: PA

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Other:		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

The MCH program does not have direct access to much of the data provided but we have a close working relationship with the Bureau of Health Statistics and Research, which provides necessary access to certain data as well as spearheads the collection of many of the mentioned data linkages.

FIELD LEVEL NOTES

1. **Section Number:** Form19_Indicator 09B

Field Name: YRBSS_09B

Row Name: Youth Risk Behavior Survey (YRBS)

Column Name:

Year: 2010

Field Note:

Pennsylvania, under a partnership between the Departments of Education and Health, implemented the Youth Risk Behavior Survey in spring 2009. In the first year, Pennsylvania will gather information from 60 public schools across the Commonwealth. The Centers for Disease Prevention and Control have committed to assist PA for five years and we hope to expand the survey in the years to come, so that we can gather more accurate and representative data.

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: PA

Form Level Notes for Form 11

Pennsylvania does not obtain preliminary annual birth and death statistical files appropriate for updating indicators in the Title V grant application until usually past the July submittal deadline. Preliminary birth and death files are usually available 6 to 12 months after the end of the calendar year and final birth and death files are usually available 12 to 18 months after the end of the calendar year. For example, the preliminary 2008 birth file should be available sometime between July 2009 and December 2009. Therefore, preliminary Pennsylvania birth and death data are not available to meet the July 15 deadline for submitting the Title V Block Grant. When preliminary files are available to meet the mid-September deadline for resubmitting the Block Grant, the appropriate birth and death indicators will be updated with preliminary data. All available preliminary data provided for the mid-September deadline will be updated with final data for the July 15 deadline of the following year. However, birth and death indicators that require detailed population data in their calculations, such as child death rate and teen birth rate, cannot be updated in time to meet the mid-September deadline. Pennsylvania obtains detailed population estimates for a previous (non-census) year to compute vital statistics rates from the state's census affiliate. Those population figures are not provided until approximately October of the following year. For example, the 2008 population estimates for Pennsylvania will be available in October of 2009. Therefore, preliminary data for these population-based indicators cannot be provided by July or September. **IMPORTANT:** Please note that the above dates are provided as rough guidelines for when annual birth and death data files become available. A preliminary 2008 birth file is available and a preliminary 2008 death file is not available as of September 3, 2009.

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	8.2	8.3	8.5	8.4	8.3
Numerator	11,706	12,045	12,479	12,496	12,301
Denominator	143,475	144,278	147,333	148,683	148,448

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. Section Number: Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2008

Field Note:

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

2. Section Number: Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

3. Section Number: Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2006

Field Note:

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data			
	2004	2005	2006	2007	2008
Annual Indicator	<u>6.4</u>	<u>6.6</u>	<u>6.6</u>	<u>6.6</u>	<u>6.5</u>
Numerator	<u>8,788</u>	<u>9,139</u>	<u>9,411</u>	<u>9,452</u>	<u>9,238</u>
Denominator	<u>138,366</u>	<u>139,143</u>	<u>142,021</u>	<u>143,431</u>	<u>143,096</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

2. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

3. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2006**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

		Annual Indicator Data			
	2004	2005	2006	2007	2008
Annual Indicator	<u>1.6</u>	<u>1.6</u>	<u>1.6</u>	<u>1.6</u>	<u>1.6</u>
Numerator	<u>2,282</u>	<u>2,272</u>	<u>2,394</u>	<u>2,390</u>	<u>2,430</u>
Denominator	<u>143,475</u>	<u>144,278</u>	<u>147,333</u>	<u>148,683</u>	<u>148,448</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2008**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

2. Section Number: Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2007**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

3. Section Number: Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2006**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data			
	2004	2005	2006	2007	2008
Annual Indicator	<u>1.2</u>	<u>1.2</u>	<u>1.3</u>	<u>1.2</u>	<u>1.2</u>
Numerator	<u>1,636</u>	<u>1,690</u>	<u>1,808</u>	<u>1,768</u>	<u>1,776</u>
Denominator	<u>138,366</u>	<u>139,143</u>	<u>142,021</u>	<u>143,431</u>	<u>143,096</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

2. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007

3. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2006**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	6.8	6.3	6.1	7.4	
Numerator	158	146	140	169	
Denominator	2,339,033	2,326,570	2,313,503	2,299,158	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2004	2005	Annual Indicator Data		2008
			2006	2007	
Annual Indicator	2.5	2.3	2.9	2.2	
Numerator	59	54	66	50	
Denominator	2,339,033	2,326,570	2,313,503	2,299,158	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	20.6	24.2	20.1	22.4	
Numerator	363	429	362	405	
Denominator	1,759,661	1,776,217	1,800,534	1,808,240	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	281.0	258.9	260.9	246.9	
Numerator	6,573	6,024	6,036	5,677	
Denominator	2,339,033	2,326,570	2,313,503	2,299,158	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	43.3	38.9	36.2	32.8	
Numerator	1,012	906	838	753	
Denominator	2,339,033	2,326,570	2,313,503	2,299,158	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	191.6	197.4	199.1	183.5	
Numerator	3,372	3,506	3,585	3,318	
Denominator	1,759,661	1,776,217	1,800,534	1,808,240	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar year.

2. Section Number: Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction

Denominator source: PA State Data Center

3. Section Number: Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2004	2005	Annual Indicator Data		
			2006	2007	2008
Annual Indicator	25.9	25.2	26.1	27.9	
Numerator	11,744	11,517	12,033	12,816	
Denominator	453,452	457,118	460,542	459,738	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar.

2. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator Source: PA State Data Center

3. **Section Number:** Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator Source: PA State Data Center

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2004	2005	Annual Indicator Data		2008
			2006	2007	
Annual Indicator	<u>7.2</u>	<u>7.1</u>	<u>7.6</u>	<u>8.3</u>	<u> </u>
Numerator	<u>14,817</u>	<u>14,582</u>	<u>15,513</u>	<u>16,751</u>	<u> </u>
Denominator	<u>2,057,534</u>	<u>2,044,703</u>	<u>2,039,437</u>	<u>2,020,889</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2008

Field Note:

Data not available. Usually these data are available 11 to 12 months from the close of the calendar.

2. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2007

Field Note:

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator source: PA State Data Center

3. **Section Number:** Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2006

Field Note:

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator source: PA State Data Center

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	148,577	121,109	20,506	0	5,851	0	0	1,111
Children 1 through 4	584,379	470,872	80,167	0	16,905	0	0	16,435
Children 5 through 9	759,157	617,000	101,706	0	19,364	0	0	21,087
Children 10 through 14	807,045	660,112	110,777	0	17,639	0	0	18,517
Children 15 through 19	926,505	765,138	122,922	0	21,375	0	0	17,070
Children 20 through 24	881,735	725,381	118,523	0	23,683	0	0	14,148
Children 0 through 24	4,107,398	3,359,612	554,601	0	104,817	0	0	88,368

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	134,887	13,690	0
Children 1 through 4	536,087	48,292	0
Children 5 through 9	703,577	55,580	0
Children 10 through 14	755,146	51,899	0
Children 15 through 19	873,033	53,472	0
Children 20 through 24	830,722	51,013	0
Children 0 through 24	3,833,452	273,946	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	158	38	87	0	0	0	0	33
Women 15 through 17	4,269	1,830	1,518	12	34	6	0	869
Women 18 through 19	9,439	5,167	2,764	24	59	10	0	1,415
Women 20 through 34	112,353	82,485	15,839	163	4,057	59	0	9,750
Women 35 or older	22,632	18,051	2,212	19	1,164	9	0	1,177
Women of all ages	148,851	107,571	22,420	218	5,314	84	0	13,244

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	119	35	4
Women 15 through 17	3,226	939	104
Women 18 through 19	7,733	1,533	173
Women 20 through 34	100,895	10,129	1,329
Women 35 or older	21,089	1,243	300
Women of all ages	133,062	13,879	1,910

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	1,123	676	375	0	24	0	0	48
Children 1 through 4	162	124	31	0	5	0	0	2
Children 5 through 9	96	69	25	0	2	0	0	0
Children 10 through 14	126	99	26	1	0	0	0	0
Children 15 through 19	520	371	144	0	4	0	0	1
Children 20 through 24	840	640	185	1	9	0	0	5
Children 0 through 24	2,867	1,979	786	2	44	0	0	56

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	1,024	91	8
Children 1 through 4	146	15	1
Children 5 through 9	88	8	0
Children 10 through 14	113	13	0
Children 15 through 19	497	23	0
Children 20 through 24	779	60	1
Children 0 through 24	2,647	210	10

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Final

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	3,225,663	2,634,231	436,078	0	81,134	0	0	74,220	2007
Percent in household headed by single parent	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2007
Percent in TANF (Grant) families	7.6	3.3	27.5	0.0	3.4	0.0	0.0	49.6	2007
Number enrolled in Medicaid	1,098,236	615,031	312,827	1,629	22,172	350	0	146,227	2007
Number enrolled in SCHIP	199,651	107,711	25,429	294	5,937	86	4,264	55,930	2008
Number living in foster home care	17,600	8,477	7,502	28	75	3	0	1,515	2008
Number enrolled in food stamp program	719,960	363,883	245,679	1,033	8,542	230	0	100,593	2007
Number enrolled in WIC	379,102	250,782	100,698	6,161	9,169	12,292	0	0	2008
Rate (per 100,000) of juvenile crime arrests	3,759.1	2,479.8	10,982.0	0.0	902.1	0.0	0.0	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	2.6	1.7	5.5	4.0	1.6	0.0	4.4	0.0	2007

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	3,002,730	222,933	0	2007
Percent in household headed by single parent	0.0	0.0	0.0	2007
Percent in TANF (Grant) families	6.8	18.8	0.0	2007
Number enrolled in Medicaid	947,544	150,692	0	2007
Number enrolled in SCHIP	193,170	6,481	0	2008
Number living in foster home care	16,053	1,543	4	2008
Number enrolled in food stamp program	606,984	112,976	0	2007
Number enrolled in WIC	305,873	70,155	0	2008
Rate (per 100,000) of juvenile crime arrests	0.0	5,033.7	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	0.0	6.7	0.0	2007

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	0
Living in urban areas	2,861,230
Living in rural areas	364,433
Living in frontier areas	0
Total - all children 0 through 19	3,225,663

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	11,998,834.0
Percent Below: 50% of poverty	5.1
100% of poverty	11.6
200% of poverty	28.5

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: PA

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	2,739,337.0
Percent Below: 50% of poverty	7.6
100% of poverty	16.3
200% of poverty	36.4

FORM NOTES FOR FORM 21

HSI #6A & 6B
Source: PA State Data Center
HSI #7A & 7B
Source: PA Department of Health, Bureau of Health Statistics and Research
HSI #8A & 8B
Source: PA Department of Health, Bureau of Health Statistics and Research
HSI #10
Source: PA State Data Center
HSI #11
Source: U.S. Census Bureau, American Community Survey
HSI #12
Data provided are for children 0-17 years of age. Source: U.S. Census Bureau, American Community Survey

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
2. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
3. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
4. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
5. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Children15to19
Row Name: children 15 through 19
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
6. **Section Number:** Form21_Indicator 06A
Field Name: S06_Race_Children20to24
Row Name: children 20 through 24
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
7. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women15
Row Name: Women < 15
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
8. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women15to17
Row Name: Women 15 through 17
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
9. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women18to19

- Row Name:** Women 18 through 19
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
10. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women20to34
Row Name: Women 20 through 34
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
11. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women35
Row Name: Women 35 or older
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
12. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
13. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
14. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
15. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
16. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Children15to19
Row Name: children 15 through 19
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
17. **Section Number:** Form21_Indicator 08A
Field Name: S08_Race_Children20to24
Row Name: children 20 through 24
Column Name:
Year: 2010
Field Note:
Native Hawaiian or other Pacific Islander included in Asian. More than one race reported: Na
18. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or other Pacific Islander included in Asian.
More than one race reported: Na
- Source: PA State Data Center
19. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2010
Field Note:
Data are available only in a census year.
20. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2010
Field Note:

American Indian or Native Alaskan: Na
Native Hawaiian or Other Pacific Islander: Na
More than one race reported: Na

Percent in TANF (Grant) families is for FFY 2007-2008.
Source: PA Department of Public Welfare

21. Section Number: Form21_Indicator 09A

Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2010
Field Note:
More than one race reported: Na

Data are for FFY 2007-2008.
Source: PA Department of Public Welfare

22. Section Number: Form21_Indicator 09A

Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2010
Field Note:
Number enrolled in SCHIP – figures are as of 12/31/08.
Source: PA Department of Insurance

23. Section Number: Form21_Indicator 09A

Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2010
Field Note:
More than one race reported: Na

Data are for FFY 2007-2008.
Source: PA Department of Public Welfare

24. Section Number: Form21_Indicator 09A

Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2010
Field Note:
More than one race reported: Na
Other and Unknown: Na

Includes all enrolled in WIC (not limited to children 19 and under)
Source: Division of Women, Infants and Children

25. Section Number: Form21_Indicator 09A

Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2010
Field Note:
American Indian or Native Alaskan: Na
Native Hawaiian or Other Pacific Islander included in Asian.
More than one race reported: Na
Other and Unknown: Na

Rate (per 100,000) of juvenile crime arrests is based on population under age 18 and all arrests under age 18.
Source: Official PA State Police Web Site

26. Section Number: Form21_Indicator 09A

Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2010
Field Note:
Percentage of high school drop-outs (grade 9 through 12) white and black are non-Hispanic white and black and Native Hawaiian or Other Pacific Islander is included in Asian.
Other and Unknown: Na

Data are for school year 2007-2008.
Source: PA Department of Education

27. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_Children
Row Name: All children 0 through 19
Column Name:
Year: 2010
Field Note:
Ethnicity Not Reported: Na

28. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2010
Field Note:
Na

29. Section Number: Form21_Indicator 09B

Field Name: HSIEthnicity_TANFPercent

- Row Name:** Percent in TANF (Grant) families
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
30. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
31. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
32. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
33. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
34. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
 Total NOT Hispanic or Latino: Na
35. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2010
Field Note:
 Ethnicity Not Reported: Na
 Total NOT Hispanic or Latino: Na
36. **Section Number:** Form21_Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2010
Field Note:
 Na
37. **Section Number:** Form21_Indicator 10
Field Name: Urban
Row Name: Living in urban areas
Column Name:
Year: 2010
Field Note:
 "Living in urban areas" is the number of children ages 0-19 in 2007 living in counties designated as urban (50% or more of the total population live in urban areas) in the 2000 U.S. Census. "Living in rural areas" is the number of children ages 0-19 in 2007 living in counties designated as rural (less than 50% of total population live in urban areas) in the 2000 U.S. Census. No standard definition provided for "metropolitan" area.
38. **Section Number:** Form21_Indicator 10
Field Name: Rural
Row Name: Living in rural areas
Column Name:
Year: 2010
Field Note:
 "Living in urban areas" is the number of children ages 0-19 in 2007 living in counties designated as urban (50% or more of the total population live in urban areas) in the 2000 U.S. Census. "Living in rural areas" is the number of children ages 0-19 in 2007 living in counties designated as rural (less than 50% of total population live in urban areas) in the 2000 U.S. Census. No standard definition provided for "metropolitan" area.
39. **Section Number:** Form21_Indicator 10
Field Name: Frontier
Row Name: Living in frontier areas
Column Name:
Year: 2010
Field Note:
 Na
40. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:

Year: 2010

Field Note:

More than one race reported: Na

Number living in foster home care is as of 09/30/08. Children may be counted by more than one category of race.

Source: PA Department of Public Welfare